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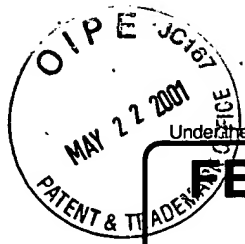
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		<b>Application Number</b>	09/476,633
		<b>Filing Date</b>	December 31, 1999
		<b>First Named Inventor</b>	Li-Shun Wang
		<b>Group Art Unit</b>	2823
		<b>Examiner Name</b>	Garcia, J.
<b>Total Number of Pages in This Submission</b>	13	<b>Attorney Docket Number</b>	42390P7832

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<div>Return Postcard</div> <div>TECHNOLOGY CENTER 2800</div> <div>MAY 31 2001</div> <div>RECEIVED</div>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b>	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
<b>Firm or Individual name</b>	Carol F. Barry; Reg. No. 41,600 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
<b>Signature</b>	
<b>Date</b>	May 17, 2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <b>May 17, 2001</b>			
<b>Typed or printed name</b>	Nadya Gordon		
<b>Signature</b>		<b>Date</b>	05/17/01

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**FREE TRANSMITTAL**  
**for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$) 110.00**Complete if Known**

Application Number	09/476,633
Filing Date	12/31/99
First Named Inventor	Li-Shun Wang, et al.
Examiner Name	Garcia, J.
Group Art Unit	2823
Attorney Docket Number	42390P7832

**METHOD OF PAYMENT** (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name Blakely, Sokoloff, Taylor &amp; Zafman LLP

- ☒
- Charge Any Additional Fee Required Under 37CFR 1.16 and 1.17
- 
- ☐
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Money Order ☐ Other**FEE CALCULATION****1. FILING FEE**

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1)** (\$) **2. CLAIMS**

Total Claims	Extra	Fee from below	Fee Paid
21	X		
3	X		

Multiple Dependent Claims

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple Dependent claim
109	80	209	40	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$) 

\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION** (continued)**3. ADDITIONAL FEE**

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	110
116	390	216	195	Extension for response within second month	
117	890	217	445	Extension for response within third month	
118	1,390	218	695	Extension for response within fourth month	
128	1,890	228	945	Extension for response within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentionally	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3)** (\$) 110.00

\* Reduced by Basic Filing Fee Paid

**SUBMITTED BY**

Typed or Printed Name Carol F. Barry, Reg. No. 41,600

Signature

Date

5/17/2001

**Complete (if applicable)**

Reg. Number

Deposit Account User ID

02-2666

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